



PART B - FEE(S) TRANSMITTAL

d send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Complete

Commissioner for Patents Alexandria, Virginia 22313-1450

Fax (703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEB (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

intenance fee notifications.
CORRESPONDENCE ADDRESS (Note: Logisty mark-up

05/23/2003

Ronald L Grudziecki Burns Doane Swecker & Mathis LLP P O Box 1404 Alexandria, VA 22313-1404

Note: A certificate of mailing can only be used for demestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the
United States Fostal Service with sufficient postage fur first class mail in an
envelope addressed to the Box Issue Fee address shove, or being faceimile
transmitted to the USFTO, on the date indicated below.

(Depositor's name) Jennie Snead (Signature) (Date 03

DATE DEE

CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 8153 026125-068 Jiren Yuan 09/28/2000 109/672.803

TITLE OF INVENTION: VERSATILE CHARGE SAMPLING CIRCUITS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL PER(S) DOR	DATE DOB
nonprovisional	NO	\$1300	\$0	\$1300	08/25/2003
EXAMD	VER	ART UNIT	CLASS-SUBCLASS .		
TON, MY TRANG		2816	327-091000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) stached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) stached. Use of a Customer Number is required.			2. For printing on the patent fro the names of up to 3 registered or agents OR, alternatively, (2) single firm (having as a ment attorney or agent) and the nar registered patent attorneys or ag is listed, no name will be printed.	patent attorneys the name of a ber, a registered nes of up to 2 emis. If no name	Doane, Swecker

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Telefonaktiebolaget LM Kricsson (publ)

Stockholm, Sweden

Please check the appropriate assigned category or categories (wi	ll not be printed on the patent) indivi	dual group oration or other private group entity G government		
4a. The following fee(s) are enclosed: [I Issue Fee D Publication Fee T Advance Order - # of Copies 10	4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-4800 (enclose an extra copy of this form).			
Commissioner for Patents is requested to apply the Issue Fee an Stephen J. Tytram Beg. No. 45 (Authorized Signature)		previously paid issue fee to the application identified above.		

7/30/03

NOTE: The Issue Fee and Profication Fee (if required) will not be accepted from anyone other than the applicant, a Egistered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

07/31/2003 HALI22 00000098 024800 09672803 01 FC:1501

1300.00 DA 02 FC:8001 30.00 DA

TRANSMIT THIS FORM WITH FEE(S)